



Health and
Human Services



Iowa HOME

Concept Paper for Home and Community-
Based Services Waiver Redesign

EVALUATION TEAM FROM MATHEMATICA

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Glossary of Terms

Term	Acronym	Notes
Community-based services	CBS	The broad set of services that support people who are aging, have disabilities, or have behavioral health needs either in their homes or in the community, as opposed to those in a facility or institutional setting. This includes home and community-based services (HCBS) funded by Medicaid as well as services funded through Iowa’s Mental Health and Disability Services (MHDS) system, the Department of Aging, and other programs in the state.
Centers for Medicare & Medicaid Services	CMS	CMS is the federal agency that provides health coverage to more than 160 million people through Medicare, Medicaid, the Children’s Health Insurance Program, and the Health Insurance Marketplace.
Early Periodic Screening Diagnosis and Treatment	EPSDT	A program that provides comprehensive and preventative health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventative, dental, mental health, developmental, and specialty services.
Home and community-based services	HCBS	Medicaid-funded programs and services that support people with disabilities and/or behavioral health needs as well as older Iowans to live in the community. These programs include Medicaid HCBS waiver programs, Habilitation Services, Program of All-inclusive Care for the Elderly, Home Health Services, Private Duty Nursing/Personal Care Program, Hospice Services, Targeted Case Management, and Money Follows the Person.
Hope and Opportunity in Many Environments project	HOME project	A project in Iowa that is working to improve and ensure that everyone has access to high-quality behavioral health, disability and aging services in their communities. To achieve this, the Iowa Department of Health and Human Services (Iowa HHS) contracted Mathematica and The Harkin Institute.
Individuals with Disabilities Education Act	IDEA	A law that makes available a free appropriate public education to children with disabilities throughout the nation and ensures special education and related services to those children.
Iowa Department of Health and Human Services	Iowa HHS	An Iowa state agency provides high quality programs and services, including the state’s Medicaid program, that protect and improve the health and resiliency of Iowans.

Executive Summary

As part of the [Hope and Opportunity in Many Environments \(HOME\) project](#), The Iowa Department of Health and Human Services (Iowa HHS) is redesigning its Medicaid home and community-based services (HCBS) waiver system. The goals are to enhance services, support people to remain in their communities with their loved ones and make it easier for people to access the supports they need.

This concept paper describes the proposed changes to the Iowa Medicaid HCBS waiver system and outlines opportunities for Iowans to share thoughts and suggestions for improving HCBS waivers.

Iowa HHS conducted research and gathered feedback from Iowans to learn about challenges with the current community-based services system, including HCBS waivers. Findings revealed that waitlists are not timely, efficient or needs based. Services do not consistently align with Iowans needs and services and supports are difficult to navigate and access. Feedback from Iowans showed opportunities for the waiver system to be more efficient, easier to understand and better at connecting Iowans to the services and supports they need across their lives.

In response to this input, Iowa HHS proposes transitioning to a streamlined system with fewer waivers in which individuals would have access to a broader range of services to meet their needs across the lifespan. Iowa HHS proposes three main changes:

1. **Changing from 7 disability-specific waivers to 2 age-based waivers with more expansive eligibility criteria.** Iowa HHS proposes having one waiver for Children and Youth (through age 20) and one waiver for Adults & Aging populations (ages 21 and over) to focus on the person and their needs across the lifespan rather than the person's diagnosis or living situation. Iowa HHS also proposes adding individuals with developmental disabilities as an eligible group for both new waivers.
2. **Offering more comprehensive service packages** with formal and informal supports that meet the needs of Iowans throughout their lives.
3. **Developing "tiered" budgets that allocate resources for eligible people based on their needs.** This approach would help ensure that waiver-enrolled Iowans receive the amount, duration and scope of services that they need in an efficient and cost-effective way.

The proposed changes would happen gradually and depend on approval from the Iowa legislature and Centers for Medicare & Medicaid Service (CMS). In 2023, Iowa HHS began working to expand certain services and align definitions and service limits across existing waivers. In 2024, Iowa HHS plans to seek approval of initial changes to existing waivers. In 2025, Iowa HHS will then seek approval for the new waivers and other federal authorities for appropriation in state fiscal year 2026. Iowa HHS estimates that CMS will approve the new age-based waivers to start on July 1, 2025.

Iowa HHS plans to put systems and processes in place to support the two new waivers. In addition to redesigning HCBS waivers, Iowa HHS is working on other Medicaid-related changes to address challenges and improve the community-based services system. Iowa HHS encourages Iowans to be involved in the HOME project and continue providing input. To give feedback on the HCBS changes detailed in this concept paper, please email iowahcbs@mathematica-mpr.com, or fill out this [feedback form](#).

I. Introduction

The Iowa Department of Health and Human Services (Iowa HHS) is working to make sure that people in Iowa have access to high-quality behavioral health, disability, and aging services in their communities. Through the Hope and Opportunity in Many Environments (HOME) project, Iowa HHS is using Iowans' input to redesign its community-based services (CBS). The goal is to enhance services, allowing people to remain in their communities with their loved ones, making it easier for them to access the help they need.

“People who need long-term services and supports should be able to live and thrive in a place that feels like home – where they receive services that support their ability to work, be active and enjoy life with people they love.”

— Elizabeth Matney, State Medicaid Director, Iowa
Department of Health and Human Services

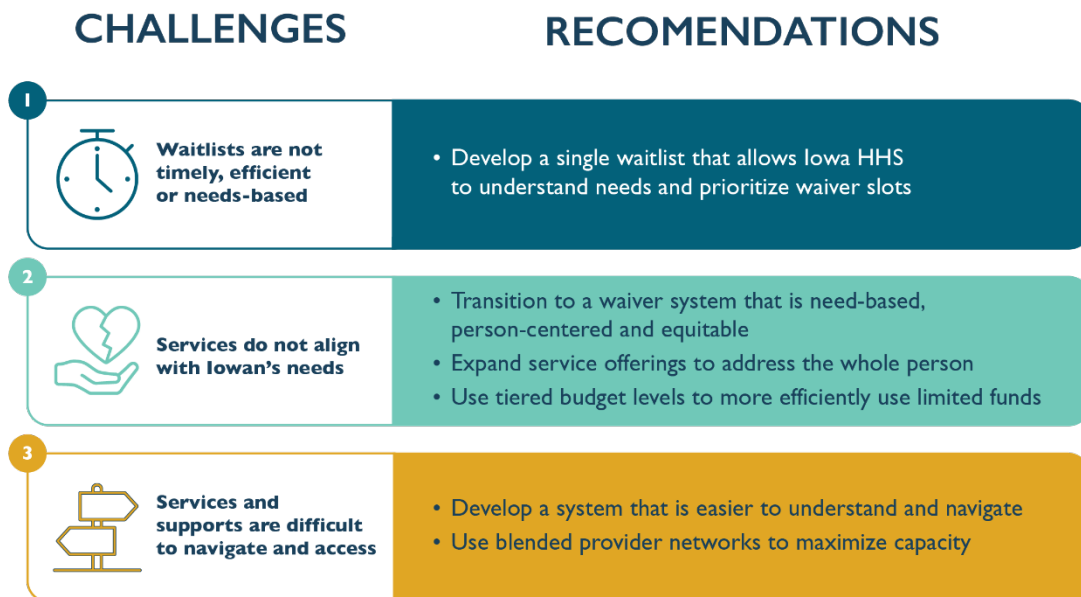
As part of the HOME project, Iowa HHS strives to develop an enhanced Medicaid home and community-based services (HCBS) waiver system that advances equitable access to services and aligns HCBS with the unique needs of each Iowan. Input from Iowans who use HCBS, caregivers, service providers, case managers, advocates, and community members is crucial to HCBS waiver redesign. This concept paper describes the proposed changes to the HCBS waiver system and outlines upcoming opportunities for Iowans to share thoughts and suggestions for improving HCBS waivers.

CURRENT HCBS WAIVER SYSTEM AND ITS CHALLENGES

Iowa provides CBS like personal care and respite to nearly 26,000 Medicaid members who have long-term care needs and live in their community, rather than in an institutional setting. Iowa offers these services through seven different service packages called [Medicaid HCBS waivers](#) (authorized under Section 1915 (c) of the Social Security Act). Each waiver serves a single group of people based on their diagnosis or disability types. Though the same service may be available under multiple waivers, each waiver has a distinct service package. Some services, like respite, are available in six of the seven waivers, while other services, like day habilitation, are only available to individuals in a single waiver ([Appendix A](#) shows the current services available under each waiver). All waivers except the Elderly waiver and AIDS/HIV waiver have waitlists.

In late 2022, the HOME project conducted an evaluation of Iowa's current CBS system to develop recommendations for improvements. Sources of information included (1) an in-depth review of Iowa HHS programs, policies, and procedures; (2) an analysis of administrative data used by programs in the CBS system and (3) input from community members (Iowans needing home and community services, families, caregivers, and providers) about their experiences with the CBS system and their recommendations about needed system reforms. **The [evaluation](#) identified three opportunities to improve Iowa's current CBS system**, which include recommendations related to HCBS waivers (Figure 1).

Figure 1. Three challenges and recommendations to improve the CBS system



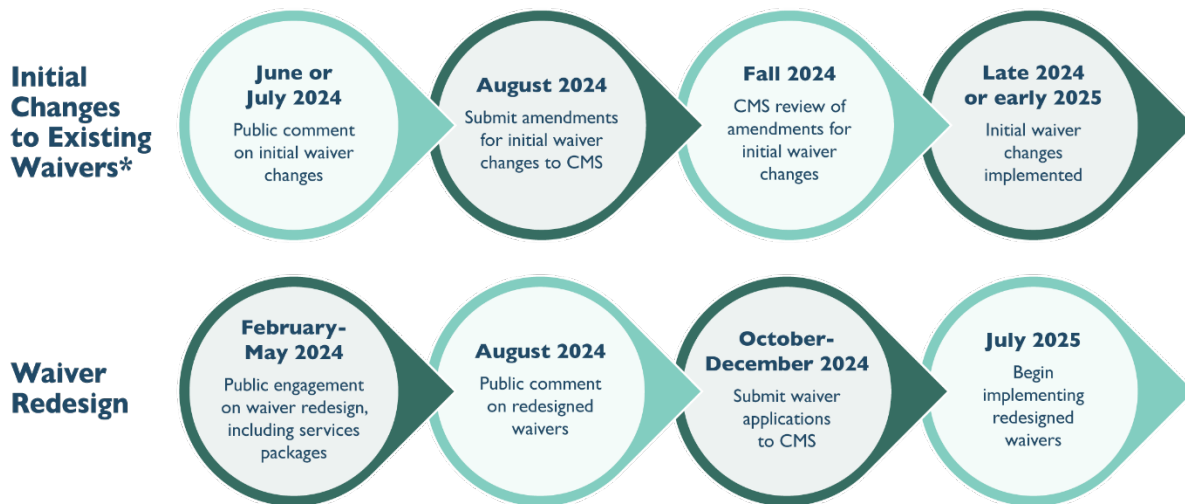
To build on Year 1 findings, Iowa HHS has invited Iowans to share their thoughts on the CBS system through numerous [virtual](#) and [in-person](#) feedback opportunities. Feedback from Iowans showed opportunities for the waiver system to be more efficient, easier to understand and better at connecting Iowans to the services and supports they need to remain in their homes, regardless of age and disability.

II. Proposed HCBS Waiver Redesign

In response to input from lowans and the evaluation findings, Iowa HHS is designing an improved HCBS waiver system. Iowa HHS is planning for a streamlined system with fewer waivers in which individuals would have access to a broader range of services to meet their needs across the lifespan. These proposed changes would happen gradually and depend on approval from the Iowa legislature and the Centers for Medicare & Medicaid Services (CMS). Figure 2 shows a preliminary timeline for proposed waiver changes.

Given they receive approval, Iowa HHS plans to make initial changes to existing waivers in 2024. These initial changes are described in [Section III. Transitioning to a New Waiver System](#). Iowa HHS will then implement additional changes to the HCBS waiver system in phases. Starting in 2025, Iowa HHS anticipates that more significant waiver-related changes will begin, including transitioning to two new waivers, and changes to the waitlist process and service delivery. Iowa HHS will seek input from lowans throughout the process.

Figure 2. Proposed timeline for waiver redesign



**Timeline contingent upon ongoing support from the IA legislature and federal review, support, and approval*

Three proposed changes summarize Iowa HHS' approach to HCBS waiver redesign (Figure 3). Though Iowa HHS is pursuing these changes, the final service package will depend on forthcoming information on costs and state appropriations.


Figure 3. Three proposed changes to the HCBS waiver system



1. CHANGE FROM 7 DISABILITY-SPECIFIC WAIVERS TO 2 AGE-BASED WAIVERS WITH MORE EXPANSIVE ELIGIBILITY CRITERIA

IA HHS proposes streamlining the seven current HCBS waivers into two new waivers based on age (Figure 4). The **HOME waiver for Children and Youth** would include a service package that supports needs in early childhood, in school, and as youth transition into adulthood. The **HOME waiver for Adults & Aging populations** would include a service package that supports needs in adulthood and as lowans age. This waiver structure would help Iowa HHS focus on the person and their needs across the lifespan rather than the person's diagnosis or living situation. Through this structure, case managers and providers would be able to specialize in age-appropriate services. The changes would also simplify waivers to make it easier for lowans to understand services available and access services.

Figure 4. Current HCBS waivers (2024) and proposed redesign beginning in 2025

CURRENT HCBS WAIVERS (2024)			PROPOSED WAIVER REDESIGN (2025/2026)		
WAIVER	GROUPS SERVED	AGES SERVED	WAIVER	GROUPS SERVED	AGES SERVED
Elderly	Aging	65+		<ul style="list-style-type: none"> • Intellectual disability • Brain injury • AIDS/HIV • Physical disability, including blindness • SED • Developmental Disabilities NEW 	0-20
Intellectual Disability	Intellectual Disability	0+			
Brain Injury	Brain Injury	0+		<ul style="list-style-type: none"> • Intellectual disability • Brain injury • AIDS/HIV • Physical disability, including blindness • Aging • Developmental Disabilities NEW 	21+
AIDS/HIV	AIDS/HIV	0+			
Health & Disability	Physical disability; blind or disabled	0-64			
Physical Disability	Physical disability; blind or disabled	18-64			
Children's Mental Health	Serious emotional disturbance (SED)	0-17			

Operating two, age-based waivers would allow Iowa to offer a comprehensive service package to children that complements federally mandated services available to children under the Early Periodic Screening Diagnosis and Treatment (EPSDT) benefit and the Individuals with Disabilities Education Act (IDEA), as well as Medicaid school-based services like behavior counseling, nursing and special transportation. Iowa HHS will work to streamline service definitions on the Children & Youth waiver to ensure there is not duplication across these programs. Additionally, offering two, age-based waivers would also allow Iowa to offer a comprehensive service package to adults that is not limited by EPSDT requirements.

Iowa HHS is mindful of feedback from Iowans that emphasized the importance of supporting transitions between waivers to avoid gaps in service. To this end, IA HHS proposes transitioning individuals between waivers at one predictable point in life (age 21) so that transition planning can be built into waiver requirements. Careful planning and implementation of effective care coordination, as well as reserved capacity in the Adult and Aging waiver for youth transitioning out of the Children and Youth waiver will ensure that there are no service disruptions as children transition to the Adult and Aging waiver.

Iowa HHS is planning to address that some people in the current HCBS waiver system apply for multiple waivers and stay on waitlists for long periods without receiving adequate services to meet their needs. Future waitlists would include an assessment and prioritization system to ensure that Iowans with the highest need can access services in a timely fashion. Population groups that currently do not face waiver waitlists may be placed on a waitlist if an assessment determines they have lower needs.

Iowa HHS is planning navigation services to connect people with services and supports while they are on a waitlist.

Entry and eligibility

To be eligible for a waiver, lowans would still need to meet three criteria: 1) they must be eligible for Medicaid, 2) they must need a level of care that otherwise would be provided at an institution, and 3) their disability must fall into the categories listed in [Figure 4](#). Currently, Iowa HHS is proposing that both new waivers include all levels of care currently served by Iowa's waivers: Nursing facility, intermediate care facility for intellectual disability, and hospital levels of care across both new waivers; and psychiatric mental institution for children level of care on the new Children and Youth waiver.¹ This approach emphasizes caregiver support for individuals living with their family and ensures that services and service definitions meet the needs of people living in a broad array of housing options including provider owned and/or operated settings.

Iowa HHS also proposes adding developmental disabilities as a target group for both new waivers. This recommendation responds to input from lowans on the challenges individuals with developmental disabilities face accessing needed services under the current waiver structure.

2. OFFER COMPREHENSIVE SERVICE PACKAGES

Based on community input and data on service use, Iowa HHS proposes updates to services and service definitions. Modifications to service packages will provide services more efficiently and expand service offerings. Iowa HHS plans to create service packages that:

- **Retain existing services** that lowans need and broadly use,
- **Add services** to meet lowans' current unmet needs,
- **Simplify administration** by eliminating duplication or overlapping components across services available within a waiver,

[Appendix B](#) includes the list of proposed services, whether each service is available on the Adult and Aging Waiver, Children and Youth Waiver, or both, and whether the proposed service will be available for delivery via telehealth. [Appendix C](#) includes a crosswalk between existing services and proposed services to provide detail on the proposed changes.

¹ Individuals with mental illness ages 21 and older may be eligible for the Adult and Aging waiver if they are determined to require nursing facility level of care. However, federal law does not permit states to use 1915(c) waivers to serve individuals ages 21 and older who require services provided in an Institution of Mental Disease (the "IMD exclusion"). To meet the need of adults with serious mental illness who need HCBS, Iowa operates the Habilitation Services program, which is authorized under 1915(i) authority and serves adults with functional impairments that are typically associated with serious mental illness. As children with SED age out of the Children and Youth Waiver, transition supports will be provided to help them transition to the Adult and Aging Waiver, the Habilitation Services Program, and/or appropriate adult services.

New services may add costs and Iowa will seek to maximize federal funding for services as appropriate. While service titles and definitions may change, individuals will continue to receive services to meet their needs.

3. DEVELOP “TIERED BUDGETS”

To ensure that waiver-enrolled Iowans will receive the services that they need in an efficient and cost-effective way, Iowa HHS proposes using a “tiered budgeting” approach. This would involve using an individual’s assessed needs to help set a budget for their service use. People with greater needs would have a higher budget than people with lower needs. A 2018 environmental scan² found that at least 20 states were using a tiered budget approach in a 1915 (c) waiver.

Creating a tiered budget would require using a single assessment tool for all individuals in each of the new waivers, ideally the same tool for both waivers. It would also require data that comes from that tool to help understand how people currently use services. Prior to beginning the new waivers, Iowa HHS and its partners will develop and test the approach to tiered budgeting so that people who enroll in the new waivers receive a service package that is appropriate for them. Iowa HHS will also explore ways to prevent people from experiencing significant shifts in the services they currently receive.

² Human Services Research Institute prepared the [2018 environmental scan](#) for the Minnesota Department of Human Services.

III. Transitioning to a New Waiver System

Iowa HHS plans to implement mindful transitions in which changes do not happen all at once. Changes to improve service definitions are already underway, while the change from seven waivers to two waivers will roll out over the next several years ([Figure 2](#)). Iowa HHS will provide a plan for the transition to the new waivers, balancing a variety of considerations to maximize the outcomes for people who need waiver services, their caregivers, and providers. Iowa HHS will ensure protections for lowans on waivers and adequate standards for provider participation. Lowans currently on waivers will remain on waivers, continue accessing their services, and be able to work toward their person-centered goals. Iowa HHS will provide robust communications and training to providers, case managers, caregivers, and waiver participants during the transition to the future waiver state, as well as continued opportunities to provide feedback.

HCBS WAIVER CHANGES IN 2023

In 2023, Iowa HHS began making changes to the 1915(c) HCBS waivers. Iowa HHS:

- **Added new services** including medical day care for children and enabling technology for remote support.
- **Made changes to service delivery** by adding remote support and telehealth as service delivery options when allowable, adding the Host Home service model³ as an allowable setting for the Supported Community Living service, allowing parents of minors and spouses to be paid caregivers for select services, and allowing delivery of adult day care in a member's home.
- **Modified eligibility requirements** by removing the prohibition of children in foster care from being eligible for the Child Mental Health (CMH) waiver and by adding Qualified Residential Treatment Programs (QRTP) as a place of service from which children may access reserved capacity slots on the CMH Waiver.
- **Added the waitlist priority needs assessment process** for waitlist prioritization for all waivers with a waitlist (Children's Mental Health, Health and Disability, Intellectual Disability and Physical Disability Waivers).
- **Updated eligible provider types** by adding community businesses as a provider type for Consumer Directed Attendant Care (CDAC) on some waivers.

HCBS WAIVER CHANGES PROPOSED IN 2024 AND BEYOND

Iowa HHS plans to implement additional changes gradually as Iowa transitions from seven waivers to two new waivers. In 2024, pending support from the Iowa legislature, Iowa HHS will ask CMS for

³ Host homes are community-based family home settings in which the owner or renter provides services to up to two individuals living in the home. The owner or renter must be approved as an independent contractor of a licensed agency to provide those services.

approval of initial changes to existing waivers as a precursor to submitting the request for two aged-based waivers.

Beginning in 2024, Iowa HHS plans to:

- **Create consistency across current waivers by aligning service definitions and certain service limits across waivers** to the highest limit. Specifically, Iowa HHS hopes to make limits consistent across waivers for Home and Vehicle Modifications and Supported Community Living. This would increase the spending limit for Home and Vehicle Modification to be consistent across the Elderly, Intellectual Disability (ID), Brain Injury (BI), Health & Disability and Physical Disability Waivers. The limit for Supported Community Living in the ID Waiver would increase to align with the BI Waiver limit.
- **Eliminate duplicative or overlapping waiver services** by merging duplicative services, where appropriate. These changes will impact current waivers and carry over into the two new waivers. Creating consistency before larger transformation will decrease risk and complexity of making the transition to two waivers from seven. Simplifying the system will make it easier to understand for people receiving services, case managers and providers who support Iowans across multiple waiver programs. Changes also should improve administrative efficiency.
- **Remove the prohibition of paid caregivers receiving respite for non-agency caregivers.** All family members and other non-Agency employed caregivers would have the choice to receive support through respite regardless of whether they are paid as caregivers. This change would help support family members and caregivers in continuing to serve as providers and in being able to provide higher quality support and services. Moving forward with this change in 2024 should help increase quality and availability of care while addressing provider capacity. This change would also provide an opportunity for Iowa to gauge how expanding respite impacts waiver utilization and/or expenditures, so that it can use that information to inform 2025 waiver redesign.
- **Expand access to day habilitation and supported employment by adding these services to all existing waiver service packages.** Currently, day habilitation is available on the ID waiver, and supported employment is available on the ID and BI waivers. Making these services available to more people will serve as an important stepping-stone toward full implementation of waiver redesign, while also addressing some of the immediate needs of people who would benefit from these services.

In 2024, Iowa HHS will submit the new waivers to CMS for their approval. Iowa HHS estimates that CMS will approve the new, age-based waivers to start on July 1, 2025. Iowa HHS will put systems and processes in place in preparation for the new waivers and support providers to remain enrolled throughout the transition. Iowa HHS will create and implement a plan to enroll members in the new waivers. Throughout, Iowans will receive regular updates and support from Iowa HHS to understand and plan for this transition.

In addition to redesigning HCBS waivers, Iowa HHS is working on other Medicaid-related changes to address challenges and improve the CBS system ([Figure 1](#)). This includes improvements to processes for assessment, waitlists, and service navigation. Changes also involve establishing case management ratios and training and improving quality management. These improvements will affect how people connect with and become eligible for waiver services, and how they are supported in coordinating those services. HHS will release details of these proposed changes as they become available.

IV. Conclusion and How to Get Involved

The proposed changes outlined in this concept paper reflect Iowa HHS' work to make the HCBS waiver system more efficient, easier to understand, and better at connecting lowans to the services and supports they need across their lives. Proposed changes include replacing 7 disability-based waivers to one Children and Youth waiver and one Adult and Aging waiver focused on the person and their needs across the lifespan. Iowa HHS proposes better addressing needs voiced by lowans by making individuals with developmental disabilities eligible for waivers and offering more comprehensive service packages. Finally, Iowa is developing a "tiered" budget system to allocate resources based on an individual's unique needs.

Through the HOME project, Iowa HHS is continuing to identify opportunities and plan for improvements to CBS. Continued input from lowans is crucial to making sure people in Iowa have access to high-quality behavioral health, disability, and aging services in their communities.

lowans can help shape the future of this project by sharing your thoughts and ideas on the proposed changes through virtual and in-person community feedback opportunities:

- To provide input, lowans can email iowahcbs@mathematica-mpr.com, or fill out this [feedback form](#).
- To learn more about HOME and upcoming feedback opportunities, visit the [Iowa HHS website](#), [Facebook](#), or [Twitter](#).

Appendix A. Waiver Services Comparison

This table compares the waiver services available across each of the current waivers. Some services are available under multiple waivers, while other services are only available on some waivers.

Table A.1. Waiver services comparison

Service	Elderly Waiver	Physical Disability Waiver	Health and Disability Waiver	Brain Injury Waiver	AIDS/HIV Waiver	Intellectual Disability Waiver	Children's Mental Health Waiver
Adult Day Care	X		X	X	X	X	
Assisted Living	X						
Assistive Devices	X						
Behavioral Programming				X			
Case Management	X			X			
Chore Services	X						
Consumer-Directed Attendant Care (CDAC) - Skilled	X	X	X	X	X	X	
CDAC - Unskilled	X	X	X	X	X	X	
Counseling			X		X		
Day Habilitation						X	
Environmental Modifications and Adaptive Devices							X
Family and Community Support Service							X
Family Counseling and Training Services				X			
Financial Management Services	X	X	X	X	X	X	

Service	Elderly Waiver	Physical Disability Waiver	Health and Disability Waiver	Brain Injury Waiver	AIDS/HIV Waiver	Intellectual Disability Waiver	Children's Mental Health Waiver
Home and Vehicle Modification	X	X	X	X		X	
Home Delivered Meals	X		X		X		
Home Health Aide Services	X		X		X	X	
Homemaker	X		X		X		
Independent Support Broker	X	X	X	X	X	X	
Individual Directed Goods and Services	X	X	X	X	X	X	
In-Home Family Therapy							X
Interim Medical Monitoring and Treatment			X	X		X	
Mental Health Outreach	X						
Nursing Services	X		X		X	X	
Nutritional Counseling	X		X				
Personal Emergency Response or Portable Locator System	X	X	X	X		X	
Prevocational Services				X		X	
Residential-Based Supported Community Living						X	
Respite	X		X	X	X	X	X
Self-Directed Community Support and Employment	X	X	X	X	X	X	

Service	Elderly Waiver	Physical Disability Waiver	Health and Disability Waiver	Brain Injury Waiver	AIDS/HIV Waiver	Intellectual Disability Waiver	Children's Mental Health Waiver
Self-Directed Personal Care	X	X	X	X	X	X	
Senior Companion	X						
Specialized Medical Equipment		X		X			
Supported Community Living				X		X	
Supported Employment				X		X	
Transportation	X	X		X		X	
Medical Daycare for Children			X	X		X	X
Enabling Technology for Remote Supports				X		X	

Appendix B. Preliminary Waiver Service Packages

This table shows the preliminary recommended service package for the proposed Adult and Aging waiver and a Children and Youth waiver. This table also shows which services will be available for delivery via telehealth.

Table B.1. Preliminary waiver service packages

Service	Waiver		Telehealth Option
	Adult & Aging (AA)	Children & Youth (CY)	
Daily Activities and Care			
Skilled Attendant Care*	X		
Attendant Care*	X		
Companion*	X		
Home Delivered Meals	X	X	
Home Health Aide	X		
Home Maintenance Support*	X		
Respite	X	X	
Supported Community Living	X	X	Yes
Transportation	X	X	
Medical Day Care for Children		X	
Help with Health Needs	AA	CY	
Positive Behavioral Support and Consultation*	X	X	Yes
Family Training	X		
Interim Medical Monitoring and Treatment	X		
Nursing Services	X		
Nutritional Counseling	X		Yes
Family and Community Support		X	
Equipment and Modifications	AA	CY	
Assistive Devices	X	X	
Enabling Technology for Remote Support	X	X	
Home and Vehicle Modifications	X	X	
Personal Emergency Response System	X	X	
Specialized Medical Equipment	X		

Service	Waiver		Telehealth Option
	AA	CY	
Day Services	AA	CY	
Adult Day Health	X		
Day Habilitation	X	X	
Prevocational Services	X	X	
Supported Employment*	X	X	Yes
Residential Services and Supports	AA	CY	
Assisted Living	X		
Residential-Based Supported Community Living		X	
Self-Direction Supports	AA	CY	
Financial Management Services	X	X	
Independent Support Broker	X	X	
Individual Directed Goods and Service	X	X	
Proposed New Services	AA	CY	
Community Transition Services	X	X	
Crisis Planning and Support	X	X	
Peer Mentoring	X	X	Yes

* These services are renamed versions of existing services and/or have been altered to incorporate different service components. See Appendix C for more information about each of these services.

Appendix C. Crosswalk Between Existing Services and Proposed Services

This table provides a crosswalk of the proposed HCBS waiver services with existing HCBS waiver services and highlights the changes between the two.

Table C.1. Crosswalk between existing services and proposed services

Proposed Services	Existing Service(s)	Change(s)
Skilled Attendant Care	Consumer-Directed Attendant Care (CDAC)-Skilled	Renamed Skilled Attendant Care
Attendant Care	CDAC-Unskilled and Self-Directed Personal Care	Services consolidated into one service and renamed Attendant Care
Home Maintenance Support	Chore, Homemaker, Senior Companion	Components of homemaker, chore, and senior companion services are all incorporated into this new service definition "Home Maintenance Support." Components of the previous Senior Companion service that were related to companionship or socialization were removed; these components are now included in the "Companion" service.
Companion	Senior Companion	Components of the senior companion service were moved to the new, merged service "Home Maintenance Support." Components of the previous Senior Companion service that were related to companionship or socialization are now included in the "Companion" service.
Positive Behavioral Support and Consultation	Behavioral Programming	Renamed; minor changes were made to align the definition with positive practices
Supported Employment	Supported Employment and Self-Directed Community Supports and Employment	Self-Directed Community Supports and Employment is now incorporated in Supported Employment



Iowa Medicaid

Iowa HHS